

# NEW CASTLE COUNTY APPLICATION FOR BUILDING PERMIT

Tax Parcel Number   -     -       Lot Number    AP#

## JOB LOCATION

No. \_\_\_\_\_ Street \_\_\_\_\_ Suite \_\_\_\_\_ Bldg. \_\_\_\_\_  
 Lot \_\_\_\_\_ Subdivision \_\_\_\_\_ Section \_\_\_\_\_ Zoning \_\_\_\_\_

## IDENTIFICATION

**Applicant Name** \_\_\_\_\_ **Phone #**    -

Email address \_\_\_\_\_

**Street** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Owner Name** \_\_\_\_\_ **Phone #**    -

**Street** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Contractor Name** \_\_\_\_\_ **Phone #**    -

**Registration #**   -       **Warranty Code**

I, the undersigned, own the above-referenced property or act as authorized agent for the owner

**Print Name of Applicant** \_\_\_\_\_

**Applicant signature** \_\_\_\_\_ **Date** \_\_\_ / \_\_\_ / \_\_\_

- Comm. Bldg.  Tenant Fitout  MultiFamily  Single Family Dwelling  Res. Addition  
 Detached Accessory Bldg.  Res. Renov.  Swimming Pool  Certificate of Use Only

### Description of Proposed Construction

**Building Area** \_\_\_\_\_ **Foundation Type** **Framing Type**

**Total Floor Area** \_\_\_\_\_  Slab on Grade  Wood

**Number of Stories** \_\_\_\_\_  Crawl Space  Steel

**Building Systems**  Basement  Masonry

New Plumbing  Piers/Pilings  Concrete

New HVAC **Water** **Sewage**

Elevator Cert. Req'd  Public  Public

Sprinkler System Req'd  Well  Septic

### Valuation

Permit Fees shall be based on project valuation and/or a NCC valuation form. Refer to the project's applicable permit requirement sheet for complete list of permit fees associated with the project or the NCC Building Code - Chapter Six at [www.nccde.org](http://www.nccde.org).